| PATENT APPLICATION FEE DETERMINATION RECORD  Effective January 1, 2003  10-613-422 |   |   |              |  |                                 |                  |        |                   |                        |     |                     |                        |
|--|---|---|--------------|--|---------------------------------|------------------|--------|-------------------|------------------------|-----|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                                     |   |   |              |  |                                 |                  |        | ALL EN            |                        | OR  | OTHER<br>SMALL      | THAN                   |
| TOTAL CLAIMS   |   |   | 4            |  |                                 |                  | F      | RATE              | FEE                    |     | RATE                | FEE                    |
| FOR  |   |   | NUMBER FILED |  | NUMBER EXTRA                    |                  | 88     | SIC FEE           | 375.00                 | OR  | BASIC FEE           | 750.00                 |
| TOTAL CHARGEABLE CLAIMS  |   |   | 21 minus 20= |  | •                               | • 0              |        | <b>(\$</b> 9=     |                        | OR  | X\$18=              |                        |
| INDEPENDENT CLAIMS   |   |   | minus 3 =    |  | · U                             |                  |        | X42=              |                        | OR  | X84=                |                        |
| MUL  | TIPLE DEPEN   | DENT CLAIM PF                             | RESENT       |  |                                 |                  |        | 140=              |                        | OR  | +280=               |                        |
| * If the difference in column 1 is less than zero, enter *0* in column 2           |   |   |              |  |                                 |                  |        | OTAL              |                        | ] } | TOTAL               |                        |
|  | 2-07.06   | S   | MALL         |  | OR                              | OTHER<br>SMALL   | ENTITY |                   |                        |     |                     |                        |
| ENTA   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | NUM<br>PREVI                           |                                 | PRESENT<br>EXTRA |        | RATE              | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMEN   | Total   | .4  | Minus        | - 2                                    | 20                              | 2                |        | K\$ 9=            | 1                      | OR  | X\$18=              | 1                      |
| AME  | Independent   |   |              | 1                                      | 9                               | -/               |        | X42=              | /.                     | OR  | X84=                |                        |
| Ш  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |              |  |                                 |                  |        | 140=              | /                      | OR  | +280=               |                        |
| 6  | -30-  | 04.                                       |              |  |                                 |                  |        | TOTAL<br>DIT. FEE |                        | OR  | TOTAL<br>ADDIT. FEE | -0-                    |
|  |   | (Column 1)                                |              |  | IMN 2)                          | (Column 3)       | _ ۲    |                   |                        | 1   |                     | 1221                   |
| ENT B  |   | REMAINING<br>AFTER<br>AMENDMENT           |              | NUA<br>PREVI                           | MBER<br>IOUSLY<br>D FOR         | PRESENT<br>EXTRA |        | RATE              | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |
| MON  | Total   | . 4                                       | euniM        | ** 0                                   | 20-                             | - 6              |        | X\$ 9=            |                        | OR  | X\$18=              |                        |
| AMENDMENT  | Independent   | NTATION OF ME                             | Minus        | ###                                    | 3<br>TOLAIM                     | A                |        | X42=              |                        | OR  | X84=                | -                      |
| لــا   | PHS1 PRESE  | NIAHUN OF BIG                             | JUITE D      | ====================================== | 1 ODan                          |                  | 4      | 140=              |                        | OR  | +280=               |                        |
|  |   |   |              |  |                                 |                  | AD     | TOTAL<br>DIT. FEE |                        | OR  | TOTAL ADDIT. FEE    |                        |
|  |   | (Column 1)                                |              |  | ımn 2)                          | (Column 3        |        |                   |                        |     |                     | '                      |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | NUA<br>PREV                            | HEST<br>MBER<br>TOUSLY<br>D FOR | PRESENT          |        | RATE              | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |
| N<br>N<br>N  | Total   |   | Minus        | **                                     |                                 | =                |        | X\$ 9=            |                        | OR  | X\$18=              |                        |
| AME  | Independent   | •   | Minus        | ***                                    |                                 | 3                |        | X42=              |                        | OR  | X84=                |                        |
| Ц  | FIRST PRESE   | ENTATION OF M                             | ULTIPLE 0    | EPENDEN                                | IT CLAIM                        | A                | J      | 140=              |                        | OR  | +280=               |                        |
| ***  | "If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1. |   |              |  |                                 |                  |        |                   |                        |     |                     |                        |

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Application or Docket Number